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UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA

CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debtor(s):	James Lofton Johnson Patricia Lynn Johnson	Case No: 17-71129
Γhis plan, dated Au g	gust 23, 2017, is:	
₽	the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces theconfirmed orunconfirmed Plan dated .	
	Date and Time of Modified Plan Confirming Hearing:	
	Place of Modified Plan Confirmation Hearing:	
The P	Plan provisions modified by this filing are:	
Credi	tors affected by this modification are:	

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$204,758.79

Total Non-Priority Unsecured Debt: \$59,452.43

Total Priority Debt: **\$0.00**Total Secured Debt: **\$176,024.12**

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1. **Funding of Plan.** The debtor(s) propose to pay the trustee the sum of \$800.00 Monthly for 49 months via epay. Other payments to the Trustee are as follows: NONE . The total amount to be paid into the plan is \$ 39,200.00 * .

See Provision 3.

- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
 - A. Administrative Claims under 11 U.S.C. § 1326.
 - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
 - 2. Debtor(s)' attorney will be paid \$\(\frac{3,500.00}{2,500.00} \) balance due of the total fee of \$\(\frac{4,400.00}{2,400.00} \) concurrently with or prior to the payments to remaining creditors. Includes filing fees (\$310 and \$21), credit reports and credit counseling/debtor education (\$100 (s) \$125 (j)) and the costs of mailing and copying through confirmation. Per the fee agreement, is for representation to confirmation.
 - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

<u>Creditor</u> <u>Type of Priority</u> <u>Estimated Claim</u> <u>Payment and Term</u>

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
 - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

<u>Creditor</u> <u>Collateral</u> <u>Purchase Date</u> <u>Est Debt Bal.</u> <u>Replacement Value</u> -NONE-

B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor	Collateral Description	Adeq. Protection Monthly Payment	To Be Paid By
Aaron's	Washer/Dryer	4.76	Trustee
			See 3.D.*
OneMain	2007 Chevrolet Silverado 167,000		Trustee
	miles	\$100.00	See 3.D.*
Montgomery Co.	Real Property	\$25.00	Trustee
			See 3.D.*

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

<u>Creditor</u> Aaron's	<u>Collateral</u> Washer/Dryer	Approx. Bal. of Debt or "Crammed Down" Value 252.28	Interest Rate 5%	Monthly Paymt & Est. Term** 7.56* 36 months
Montgomery County Treasurer	2842 Forage Road Shawsville, VA 24162 Montgomery County 3 bedrooms, 2 bathrooms, Tax Map: 112-2 A, County of Montgomery	1,887.84	10%	60.92* 36 months
OneMain	2007 Chevrolet Silverado 167,000 miles NADA Trade in Value: \$11,550.00 Condition: Fair	12,280.50	5%	368.06* 36 months

^{*}These payments shall begin after payment in full of approved attorney's fees. While legal fees are being paid, secured creditors shall receive the payments set forth in Provision 3.C. Following payment of legal fees, the Trustee is authorized to accelerate payment to all secured creditors.

E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

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- 4. Unsecured Claims.
 - **A. Not separately classified.** Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately **_25** _ %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately **_0** _ %.
 - B. Separately classified unsecured claims.

Creditor	Basis for Classification	Treatment
-NONE-		

- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
 - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

Creditor Bayview Financial Loan	Collateral 2842 Forage Road Shawsville, VA 24162 Montgomery County 3 bedrooms, 2 bathrooms, Tax Map: 112-2 A, County of Montgomery	Regular Contract Payment 1,191.00 Debtors will pay 2nd half of August 2017 payment directly.	Estimated Arrearage 0.00 Note: Debtor have bifurcated mortgage payment. IF claim filed for 1/2 of August, debtors will pay directly.	Arrearage Interest Rate 0%	Estimated Cure Period 0 months	Monthly Arrearage <u>Payment</u>
Bayview Financial Loan	2842 Forage Road Shawsville, VA 24162 Montgomery County 3 bedrooms, 2 bathrooms, Tax Map: 112-2 A, County of Montgomery	233.30 Debtors will pay August payment directly as due after date of filing.	0.00	0%	0 months	

B. Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

		Regular			Monthly
		Contract	Estimated Interest	Term for	Arrearage
Creditor	Collateral	Payment	Arrearage Rate	Arrearage	Payment
-NONE-		 _			

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C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

<u>Creditor</u> <u>Collateral</u> Interest Estimated
<u>Rate</u> <u>Claim</u> <u>Monthly Paymt & Est. Term**</u>
-NONE-

- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
 - A. Executory contracts and unexpired leases to be rejected. The debtor(s) reject the following executory contracts.

Creditor -NONE-

Type of Contract

B. Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

Creditor Type of Contract Arrearage for Arrears Cure Period

NONE
Monthly
Payment Estimated
for Arrearage for Arrears
Cure Period

- 7. Liens Which Debtor(s) Seek to Avoid.
 - A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

<u>Creditor</u> <u>Collateral</u> <u>Exemption Amount</u> <u>Value of Collateral</u>

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

<u>Creditor</u> <u>Type of Lien</u> <u>Description of Collateral</u> <u>Basis for Avoidance</u> -NONE-

- 8. Treatment and Payment of Claims.
 - All creditors must timely file a proof of claim to receive payment from the Trustee.
 - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
 - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
 - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.

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- **9. Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- **10. Incurrence of indebtedness.** The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:

A. ATTORNEYS FEES

Attorneys Fees noted in Paragraph 2A shall be approved on the confirmation date unless previously objected to. Attorneys fees shall be paid ahead of all other claims except adequate protection payments and conduit mortgage or secured debt payments, if any, which shall be treated in accordance with the notice in Paragraph 3.C.

B. AUTO DRAFT OF ANY DIRECT PAYMENTS BY DEBTOR AND POST-PETITION STATEMENTS

Any bank or financial institution or lender to which the debtor has previously consented to auto draft payments from his or her bank account, is expressly authorized to keep such auto-draft in place and to deduct post-petition payments from the debtor's bank account. Such a deduction will not be viewed as a violation of the automatic stay.

The automatic stay is modified to permit the noteholder or servicing agent on any secured debts being paid by the debtors to send the debtor payment coupons, payment statements or invoices, notices of late payment, notices of payment changes, notices of servicing transfers, or any other notice, other than a notice of acceleration or demand for payment of the entire balance, normally sent to customers in the ordinary course of business.

C. Debtors are paying an extra 13 months to to compensate creditors for the inherited property the male debtor transferred to children within the past two years. Debtors reported the value per the estate records, but assert the fair market value was actually likely less given asset was mobile home and older car.

Signatures:			
Dated: A	ugust 23, 2017		
/s/ James Lo	ofton Johnson	/s/ Malissa Giles; Tracy Giles;	
James Lofto	on Johnson	Malissa Giles; Tracy Giles;	
Debtor		Debtor's Attorney	
/s/ Patricia L	ynn Johnson		
Patricia Lyn	n Johnson		
Joint Debtor	r		
Exhibits:	Copy of Debtor(s)' Budget (Schedules I and J):		

Matrix of Parties Served with Plan

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Certificate of Service

I certify that on <u>September 1, 2017</u>, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

Aaron's Inc., C/O Corp Srvc Co RA 1111 East Main St

Bank of Amer. Center, 16th Floor

Richmond, VA 23219

*via Regular mail

OneMain Financial of America, Inc CT Corporation System, RA 4701 Cox Road, Suite 285 Glen Allen, VA 23060 *via Regular mail

/s/ Malissa Giles; Tracy Giles;

Malissa Giles; Tracy Giles;

Signature

129 E. Campbell Ave., Suite 300

PO Box 2780 Roanoke, VA 24001

Address

540-981-9000

Telephone No.

Ver. 09/17/09 [effective 12/01/09]

Deb	tor 1 James Lofto	n Johnson			
	tor 2 Patricia Lyn	n Johnson			
	ed States Bankruptcy Court for the	: WESTERN DISTRICT	OF VIRGINIA		
Cas	e number 17-71129			Check if this is:	
(If kno				☐ An amended filing	
				A supplement showing postpetition of 13 income as of the following date:	chapte
Of	ficial Form 106l			MM / DD/ YYYY	
Be assupption	chedule I: Your Incomplete and accurate as possiblying correct information. If you se. If you are separated and you has separate sheet to this form.	sible. If two married peo are married and not filir r spouse is not filing wi	ng jointly, and your spo th you, do not include	(Debtor 1 and Debtor 2), both are equally responsit buse is living with you, include information about y information about your spouse. If more space is n name and case number (if known). Answer every o	ble fo your neede
e as upp pou ttac	chedule I: Your Incomplete and accurate as possiblying correct information. If you se. If you are separated and you has separate sheet to this form.	sible. If two married peo are married and not filir r spouse is not filing wi	ng jointly, and your spo th you, do not include	ouse is living with you, include information about y information about your spouse. If more space is n	ble fo your neede
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Be a	chedule I: Your Incomplete and accurate as possiblying correct information. If you se. If you are separated and you has separate sheet to this form. Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	p jointly, and your spotth you, do not include onal pages, write your Debtor 1 Employed	Duse is living with you, include information about y information about your spouse. If more space is n name and case number (if known). Answer every of Debtor 2 or non-filing spouse	ble fo your needed
Be assupption	chedule I: Your Incomplete and accurate as possiblying correct information. If you se. If you are separated and you has separate sheet to this form. Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	pebtor 1 Employed Not employed	Debtor 2 or non-filling spouse Employed Not employed Pharmacy Tech	ble fo your neede
Be assupption	complete and accurate as possilying correct information. If you se. If you are separated and you ha separate sheet to this form. Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition Employment status	Debtor 1 Employed Not employed General Manager	Debtor 2 or non-filing spouse Debtor 2 or non-filing spouse Employed Not employed Pharmacy Tech	your needed

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,727.46 5,408.51 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 0.00 3. 0.00 3. +\$ 5,408.51 Calculate gross Income. Add line 2 + line 3. 2,727.46

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	James Lofton Johnson Patricia Lynn Johnson		Case n	umber (if known)	17-71129	l	
	Cop	by line 4 here	4.	For E	Debtor 1 5,408.51	For Debt	or 2 or g spouse 2,727.46	
5	Lict				<u> </u>		•	-
5.	5a.	all payroll deductions: Tax, Medicare, and Social Security deductions	5a.	\$	4 224 04	\$	440.16	
	5b.	Mandatory contributions for retirement plans	5a. 5b.	\$—	1,231.84 0.00	\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.	\$—	0.00	\$	109.10	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	-
	5e.	Insurance	5e.	\$	381.12	\$	118.19	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	-
	5g.	Union dues	5g.	\$	0.00	\$	0.00	-
	5h.	Other deductions. Specify: VOLINS	5h.+	\$		+ \$	0.00	-
		HSA		\$	0.00	\$	43.33	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,660.95	\$	710.78	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,747.56	\$	2,016.68	-
8.	List 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	Φ.		•		-
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$	0.00	\$ \$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	Ψ \$	0.00	\$	0.00	-
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	=
	8e.	Social Security	8e.	\$	0.00	\$	0.00	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	-
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.+	\$	0.00	\$	0.00	-
	OII.	Other monthly income. Specify.	_ 011.+	Ψ	0.00	Τ Ψ	0.00	- -
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00)
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	3	,747.56 + \$	2,016.6	8 = \$	5,764.24
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen			ed in <i>Schea</i>	<i>lule J.</i> 1. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies					2. \$	5,764.24
13.	`	you expect an increase or decrease within the year after you file this form?	?				Combir monthl	ned y income
		No.						dala a
		Yes. Explain: Male debtor's insurance is scheduled to increase 2017.	to th	e amo	unt reflected	above eff	ective Oc	toper,

Fill in	n this informa	ition to identify yo	our case:					
Debto		James Lofto		n .		Che	eck if this is:	
Debto		Patricia Lyni		-			An amended filing	ving postpetition chapter
(Spou	use, if filing)					_	13 expenses as of	the following date:
United	d States Bankı	ruptcy Court for the	: WESTE	RN DISTRICT OF VIRGIN	NIA		MM / DD / YYYY	
Case (If kno		7-71129						
Off	ficial Fo	rm 106J						
		J: Your	 Exper	ises				12/1
Be a infor num	s complete mation. If m ber (if know	and accurate as	possible eded, atta ry questio	. If two married people ar ch another sheet to this	e filing together, bot form. On the top of a	h are equ	ually responsible fo ional pages, write y	or supplying correct your name and case
Part 1.	Is this a joir		enoia					
	☐ No. Go to	line 2.						
	■ Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate Househo	old of Del	otor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state dependents				Granddaughter		10 months	■ No □ Yes
					Crandoon		2	■ No
					Grandson		2	☐ Yes
					Granddaughter		8	■ No □ Yes
								■ No
					Granddaughter		9	Yes
					Granddaughter		11	■ No □ Yes
					Granddaughter		11	■ No □ Yes
	expenses o	penses include f people other t d your depende	han $_{\square}$	No Yes				
		ate Your Ongoi						
expe				uptcy filing date unless y y is filed. If this is a supp				
Inclu	ıde expense	s paid for with	non-cash	government assistance i	f you know			
the v		h assistance an		cluded it on Schedule I:			Your expe	enses
(,						
		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage	4.	\$	1,191.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	137.28
	4b. Prope	rty, homeowner's	-			4b.	\$	75.00
	4c. Home	maintenance, re	pair, and ι	ıpkeep expenses		4c.	\$	100.00

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	otor 1 otor 2	James Lofton Johnson Patricia Lynn Johnson	Case number (if known)	17-71129	_
	4d.	Homeowner's association or condominium dues	4d. \$	0.00	
5.	Addi	tional mortgage payments for your residence, such as home equity loans	5. \$	233.30	

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	es Lofton Johnson cia Lynn Johnson	Case num	ber (if known)	17-71129
. Utilities:				
6a. Electr	icity, heat, natural gas	6a.	\$	300.00
6b. Water	, sewer, garbage collection	6b.	\$	0.00
6c. Telep	hone, cell phone, Internet, satellite, and cable services	6c.	\$	62.67
6d. Other	. Specify: Cell Phones	6d.	\$	200.70
Cabl	e/Satellite		\$	145.00
Inter	net		\$	91.26
Food and h	ousekeeping supplies	7.	\$	800.00
	nd children's education costs	8.	\$	0.00
Clothing, la	undry, and dry cleaning	9.	\$	100.00
•	are products and services	10.	\$	75.00
	d dental expenses	11.	·	500.00
	t ion. Include gas, maintenance, bus or train fare.		·	
	de car payments.	12.	\$	350.00
Entertainme	ent, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charitable (contributions and religious donations	14.	\$	0.00
Insurance.				
	de insurance deducted from your pay or included in lines 4 or 20.			
15a. Life in		15a.	*	0.00
15b. Health	n insurance	15b.		0.00
15c. Vehic	le insurance	15c.	\$	78.02
15d. Other	insurance. Specify:	15d.	\$	0.00
	ot include taxes deducted from your pay or included in lines 4 or 20.	16	¢	05.00
	ersonal Property Taxes, Tags, Stickers, Etc.	16.	Ф	25.00
	ayments for Vehicle 1	17a.	\$	0.00
	ayments for Vehicle 2	17b.	·	0.00
17c. Other		17c.	·	0.00
17d. Other		17d.	· -	0.00
	ents of alimony, maintenance, and support that you did not report as		Ψ	0.00
	om your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
	ents you make to support others who do not live with you.		\$	0.00
Specify:	,	19.		
	property expenses not included in lines 4 or 5 of this form or on School	edule I: Yo	our Income.	
20a. Mortg	ages on other property	20a.	\$	0.00
20b. Real	estate taxes	20b.	\$	0.00
20c. Prope	rty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maint	enance, repair, and upkeep expenses	20d.	\$	0.00
20e. Home	owner's association or condominium dues	20e.	\$	0.00
Other: Spec	ify: Pet Care, Grooming	21.	+\$	50.00
	le Maintenance		+\$	200.00
	esnes related to kids in house		+\$	150.00
-	our monthly expenses			
	es 4 through 21.		\$	4,964.23
	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line	e 22a and 22b. The result is your monthly expenses.		\$	4,964.23
Calculate y	our monthly net income.			
•	line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,764.24
	your monthly expenses from line 22c above.	23b.	-\$	4,964.23
.,	•			,
	act your monthly expenses from your monthly income.	23c.	\$	800.01
i ne re	esult is your monthly net income.	200.	7	300.01
Do you exp	ect an increase or decrease in your expenses within the year after yo	ou file this	form?	
For example,	do you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of a
	the terms of your mortgage?			
No.				
☐ Yes.	Explain here:			
	See attachment.			

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AARON'S 1546 N FRANKLIN ST CHRISTIANSBURG, VA 24073

AARON'S INC., C/O CORP SRVC CO RA 1111 EAST MAIN ST BANK OF AMER. CENTER, 16TH FLOOR RICHMOND, VA 23219

ANESTHESIOLOGY ASSOCIATES OF RADFOR PO BOX 3605 RADFORD, VA 24143

BALANCED HEALTHCARE RECEIVABLES PO BOX 9577 MANCHESTER, NH 03108

BAYVIEW FINANCIAL LOAN ATTN: CUSTOMER SERVICE DEPT 4425 PONCE DE LEON BLVD, 5TH FLOOR MIAMI, FL 33146

BLUE RIDGE CANCER CARE P.O. BOX 601507 CHARLOTTE, NC 28260

CAPITAL ONE ATTN: GENERAL CORRESPONDENCE/BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

CARILION CLINIC BOX 824579 PHILADELPHIA, PA 19182

CARILION HEALTHCARE CORP. 1502 WILLIAMSON ROAD SUITE 200 ROANOKE, VA 24012

CARILION NRV MEDICAL CENTER PO BOX 11566 ROANOKE, VA 24022

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CAVALRY PORTFOLIO SERVICES, LLC PO BOX 520 VALHALLA, NY 10595

CREDIT ONE BANK NA PO BOX 98873 LAS VEGAS, NV 89193

CREDITORS COLLECTION SERVICE P.O. BOX 21504 ROANOKE, VA 24018-0152

DOMINION PATHOLOGY ASSOCIATES PO BOX 61300 NORTH CHARLESTON, SC 29419-1300

DR. AMJAD WYNE, MD PO BOX 24848 WINSTON SALEM, NC 27114

FARHI EYE CARE & SURGERY PO BOX 14000 BELFAST, ME 04915

JH PORTFOLIO DEBT EQUITIES 5757 PHANTOM DR, STE 225 HAZELWOOD, MO 63042

LEWIS GALE PHYSICIANS P.O. BOX 740776 CINCINNATI, OH 45274

MEDICREDIT INC PO BOX 1629 MARYLAND HEIGHTS, MO 63043

MEDKEY INCORPORATED C/O LEON P. FERRANCE PO BOX 34 ROANOKE, VA 24002

MEDKEY, INC. PO BOX 40032 ROANOKE, VA 24022

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MIDLAND FUNDING ATTN: BANKRUPTCY PO BOX 939069 SAN DIEGO, CA 92193

MONTGOMERY COUNTY TREASURER 755 ROANOKE STREET, SUITE 1B CHRISTIANSBURG, VA 24073

MONTGOMERY REGIONAL HOSPITAL C/O CAWTHORN, DESKEVICH & GAVIN, PC 9701 METROPOLITAN COURT, STE C RICHMOND, VA 23236

NPAS SOLUTIONS INC PO BOX 2248 MARYLAND HEIGHTS, MO 63043

ONEMAIN ATTN: BANKRUPTCY 601 NW 2ND ST EVANSVILLE, IN 47708

ONEMAIN FINANCIAL OF AMERICA, INC CT CORPORATION SYSTEM, RA 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA 23060

PHENOPATH LABORATORIES C/O ASSET RCVRY GRP OF WASHINGTON PO BOX 3024 FEDERAL WAY, WA 98063

SCA 1502 WILLIAMSON ROAD ROANOKE, VA 24012

SOLSTAS LAB PARTNERS PO BOX 740032 CINCINNATI, OH 45274

SYNCHRONY BANK/CARE CREDIT ATTN: BANKRUPTCY PO BOX 956060 ORLANDO, FL 32896 Case 17-71129 Doc 21 Filed 09/01/17 Entered 09/01/17 12:54:23 Desc Main Document Page 16 of 16.

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WELLS FARGO DEALER SERVICES ATTN: BANKRUPTCY PO BOX 19657 IRVINE, CA 92623